

Countless citizens of CT rely on constant and consistent access to their medications. As if living with illness and finding the correct treatment plan was not hard enough, members of our community are forced to deal with insurance bait-and switch. This practice results in stable patients being forced to switch medications or even stop treatment due to unanticipated costs. Healthcare is a human right. Access to healthcare should not be a commodity only for the wealthy and privileged who can afford it. It is a human right and no person should be denied or face obstacles in obtaining the healthcare they need due to a mid-year cost switch by their for-profit insurer. When given over twenty options as to why healthcare costs are so high, CT residents cited “insurance companies charging too much” most frequently.

Connecticut is already behind the curve. Several states, including the likes of Texas, have passed similar laws eliminating mid-year formulary changes. In Texas, a health insurer may modify a policy's prescription drug coverage only at a policy's renewal. It is incredibly disappointing that Connecticut lags behind its southern counterparts when it comes to progressive, equitable healthcare legislation.

In conclusion, I would like to restate my strong support for H.B. 6622. The citizens of Connecticut deserve better than to live at the whims of insurer dictates. Catching up with the rest of the nation on this issue is the least our state can do and I ask the committee to vote favorably on this important and necessary measure.

Thank you for your time and consideration,
Evan Roberts